



DIVISION OF WORKERS' COMPENSATION

The Missouri Division of Workers' Compensation now accepts **all forms electronically via Box.com** including, but not limited to:

- **WC-151** (Information Request Letter)
- **WC-9** (Medical Treatment Form)
- **WC-2 & WC-3** (Notice of Commencement/Termination of Compensation)
- **WC-299, WC-300, WC-301 and WC-302** (Change of Address Forms)
- **Settlement Offers, Denials, and Certificates of Liability Insurance**

By using **Box.com**, your agency will save time and postage. There is **no cost** associated with using this service.

To sign up please take the following steps:

1. Please read the attached instructions and send an email to:
ElectronicFiling@labor.mo.gov.
2. You will receive an email invitation to collaborate on **Box.com**. Accept the invite that appears below the name of your agency.
3. Once your **Box.com** account is created, you will be granted access to upload documents to your agency folder.

The Division will transfer documents from **Box.com** daily.

If you have any questions, please contact:

ElectronicFiling@labor.mo.gov or call (573) 526-4943

INTRODUCING BOX.COM

Secure file submittal for Insurance Documents